FEC FORM 3	REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee	RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS 15 OCT 20 AM 10: 50 Office Use Only

1. NAME OF COMMITTEE (in full)   TYPE OR PRINT ▼   Example: If typing, type over the lines.   `12FE4M5`

August Wolf for Senate

ADDRESS (number and street)   PO Box 113255

☐ Check if different than previously reported. (ACC)   Stamford   CT   06911   –

2. FEC IDENTIFICATION NUMBER ▼   CITY ▲   STATE ▲   ZIP CODE ▲

C   C00577536

STATE ▼ DISTRICT

3. IS THIS REPORT   ☒ NEW (N)   OR   ☐ AMENDED (A)   └┴┘ └┴┘

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☐ July 15 Quarterly Report (Q2)

☒ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE)

☐ Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

☐ Primary (12P)   ☐ General (12G)   ☐ Runoff (12R)

☐ Convention (12C)   ☐ Special (12S)

Election on   M M / D D / Y Y Y Y   in the State of

(c) 30-Day **POST**-Election Report for the:

☐ General (30G)   ☐ Runoff (30R)   ☐ Special (30S)

Election on   M M / D D / Y Y Y   in the State of

5. Covering Period   M M `07` / D D `01` / Y Y Y Y `2015`   through   M M `09` / D D `30` / Y Y Y Y `2015`

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer   Christophe Esposito

Signature of Treasurer   Christophe Esposito   Date   M M `10` / D D `15` / Y Y Y Y `2015`

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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